# Rec'd PCT/PTO, 0 4 NOV 2005 536897

Attorney Docket No. 1807-0186PUSI

### BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

#### COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named

	below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
nsert Title:	ARRANGEMENT AND METHOD FOR PRODUCING A THREE-DIMENSIONAL PRODUCT						
	the specification of which docket number as set for	th is attached hereto. If a th above and/or the folio	not attached hereto wing:	, the application is ide	entified by the a	ttorney	
ill in Appropriate nformation –	The specification was file		-	Application Number		;	
	and amended on	(if appl	icable) and/or				
or Use Without	the specification was filed			Application Number	PCT/SE2003/00	n939 ;	
pecification Artached:	and was amended on		(if applicable)				
nsert Priority Momanan if appropriate)	claims, as amended by any I acknowledge the d Federal Regulations, §1.56. I do not know and d our invention thereof, or thereof or more than one y of Amorica more than one an inventor's certificate is an an application filed by prior to this application, a country foreign to the Unexcept as follows.	ont believe the same we patented or described in rear prior to this application even professor to this application of the professor to the patented before the date of this me or my legal represend that no application for ited States of America prior priority benefits under retificate listed below and g a filing date before that of the priority benefits under the p	bove.  as ever known or us any printed publication, that the same wation, that the invents application in any tative or assigns me patent or inventor's or to this application.  Title 35, United Stated have also identified the application on the application of	to patentability as defi- sed in the United States of them in any country befi- is not in public use or on- ion has not been patents country foreign to the I ore than twelve months certificate on this invent in by me or my legal re- ges Code, \$119(a)-(d) of a led below any foreign a	of America before one my or our in sale in the United or made the su United or made the su United States of A (six months for eight mass been filed presentatives or my foreign application for pad:  Priority Clair X Yes	Code of comy or vention d States abject of America designs) d in any assigns, ration (s)	
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	(Number)	(Country)	(1	Month/Day/Year Filed	Yes	No.	
nearl Manyletonal	(Number) I hereby claim the benefit listed below.	(Country) under Title 35, United S		Month/Day/Year Filed of any United States pr		No tions(s)	
nsert Provisional Application(s): if any)	(Application Number)	,	(Filing Da	ate)		-	
	(Application Number) (Filing Date)						
	All Foreign Applications, if any, for any Fatent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
osert Requested Mormation ( appropriate)	•		plication Number	Date of Filin	g (Month/Day/	Year)	
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
ssert Prior U.S. .pplication(s); ( any)	(Application Number)	(Filing	Date)	(Status - patented,	pending, aband	oned)	
	(Application Number)	(Filing	Date)	(Status - patented,	pending, aband	oned)	
lev. 05/2004)		Page 1 of 2					

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Attorney Docket No. 1807-0186PUS1

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP) Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE POLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Soly Inventor Inser Name of	GIVEN NAME/FAMILY NAME Morgan LARSSON	INVENTOR'S SIGNATURE	DATE* 0508/2				
Document is Signed	Residence (City, State & Country)	- Variation -	CITIZENSHIP				
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Insert Post Office Address	MAILING ADDRESS (Complete Street Address including City, State & Country) Eklandagatan 60 D; SE-412 61 Goteborg; SWEDEN						
Pull Name of Berond Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE				
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Pull Name of Third Investor, if anys occupance	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE				
	Residence (City, State & Country)		-CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth Inventor, it any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE				
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, of any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*				
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Sixth inventor, if any: and above	GIVÊN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*				
	Residence (City, State & Country)		CITIZENSHIP				
ĺ	MAILING ADDRESS (Complete Street Address including City, State & Country)						

\*DATE OF SIGNATURE

(Rev. 05/2004)

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